ARIZONA STATE BOARD OF HEALTH BUREAU OF VITAL STATISTICS State File No.	
I 1. PLACE OF BIRTH	TIFICATE OF BIRTH Registered No.
County. La	
District or Township	or Vijlage
City Sloke No. 423	St. 3rd St. St. Ward
(If birth occurred in a hospital or institution, give its NAME instead of street and number)	
2. Full name of child MINION Vlan	supplemental report, as directed.
3. Sex of Child To be answered ONLY in event of piural births. Twin, triplet or other 5. No., in order of birth.	7. Date of birth Port 31 1930
8. FATHER	14. O MOTHER
Full name John & Tarked &.	Full maiden name Tilpha J. Farmer
9. Residence (Usual place of abode)	15. Residence (Usual place of abode)
If non-resident, give place and state. Crusta	If non-resident, give place and state. augma
10. Color or race	16. Color or race
While 11. Age at last birthday 3 8 (Years)	White 17. Age at last birthday 29 (Years)
12. Birthplace (city or place) Solomonville	18. Birthplace (city or place) Poth Sale
(State or country) Arnona	(State or country) Jevas
13. Occupation miner -	19. Occupation Housewife
Nature of Industry	Nature of industry
20. Number of children of this mother 2 1 21. Were pressurious taken equipment	
(a) Born alive at (b) Born alive at (c) Stillborn	nd now living that now dead thalmin neonatorum?
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*	
I hereby certify that I attended the birth of this child, who was Bin alive or stillborn.)	
*When there was no attending physician or midwife, then the father, householder. Signature Numan Backener	
etc., should make this return. A stillborn } child is one that neither breathes nor	
shows other evidence of life after birth. Given name added from (Physician or Midwife),	
a supplemental report	Those arizona
	12 150 J.E. Wighting

order of birth stated.

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